

MHC

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Dorothy Murphy
P.O. Box 10817
Chicago, Ill. 60610

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Dorothy Murphy Agent
 Addressee

B. Received by (Printed Name)

Dorothy Murphy Date of Delivery

Delivery address different from Item 1? YesIs the delivery address below? No

RECEIVED

AUG 25 2008

CLERK, U.S. DISTRICT COURT

Message Type
 Certified Mail
 Registered Mail
 Return Receipt for Merchandise
 Insured Mail
 C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

2. Article Number

(Transfer from service label)

2006 0100 0001 7313 1374

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

08cv4587

FILED

AUG 25 2008 AEE
8-25-2008MICHAEL W. DOBBINS
CLERK, U.S. DISTRICT COURT.

UNITED STATES POSTAL SERVICE

CHICAGO, IL 60602

FOR
U.S. MAIL
USE AIR MAILFirst-Class Mail
Postage & Fees Paid
USPS
Permit #45870

• Sender: Please print your name, address, and ZIP+4 in this box

United States District Court
Clerk's Office
219 South Dearborn St. 20th Floor
Chicago, Ill. 60604

Dorothy Murphy 08cv4587